U S Department of Labor Office of Labor Management Standards Washington DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215 0188 Expires 11 30 2006

This report is mandatory under P L 86 257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

	**************************************
1 File Number U /500/	2 Fiscal Year Covered From
	7/1/04 Through 6/30/05
3 Name and address of person filing	4 Name file number and address of labor organization
Name Billy Borchert	Plumbers + Pipetitters  Name Local Union 572
-	Labor Organization File Number 836782
PO Box Bidg Room No If any	P O Box Building and Room Number if any
Street 240 Lyle Rd	street, 225 Ben Allen Rd
city New Johnson ville	city Nashville
State Th ZIP Code + 4 31134	State TN ZIP Code + 4 37207
5 Position in labor organization Chairman of	the Board of Trustees
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)	
A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income
Name	
Trade Name if any	
PO Box Bidg Room No if any	•
<u> </u>	7 b Arnount.
Street	
Ch.	ν
City	
State ZIP Code + 4 '	į.
Signature	

15 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions.)

Signed Billy Bosefut

on 8/15/05

615-262-0893

ZIP Code + 4 37207

or Consultant

State

Nashuille

13 b Is the Business an Employer U

\$ 673 22

14 b Amount of payment